

Streamlined Sales Tax Project

promoting a streamlined sales tax system for the 21st century

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- Sites You May Wish To Visit**
- Federation of Tax Administrators
 - Multistate Tax Commission
 - Nat'l Conference of State Legislatures
 - National Governors Association

REGISTER

Latest News and Developments

- 04/07/04 - Updated [Executive Summary](#)
- 01/22/04 - Interested in becoming a Certified Service Provider? Click [here](#) to register.
- 02/23/04 - [Streamlined Sales and Use Tax Agreement Taxability Matrix](#)
- 01/13/04 - [Approved Certificate of Exemption](#)
- 01/02/04 - [Certificate of Compliance \(Revised\)](#) (in MS Excel format)
- 01/02/04 - [Approved Amendments to Streamlined Sales and Use Tax Agreement Dated November 12, 2002](#)
- 11/6/03 - [State SSTP Compliance Legislation](#)
- 11/6/03 - [Certificate of Compliance](#)

PROJECT MISSION

The Streamlined Sales Tax Project will develop measures to design, test and implement a sales and use tax system that radically simplifies sales and use taxes.

STEERING COMMITTEE

Co-Chairs
Diane Hardt (WI)
Scott Peterson (SD)

Members
Richard Dobson (KY)
Carol Fischer (MO)
Harold Fox (NJ)
R. Bruce Johnson (UT)
Eleanor Kim (TX)
Tom Kimmitt (PA)
Charlotte Quarles (KY)
Marshall Stranburg (FL)

CONTACT US!

ADVISORY GROUP

Great Resource for drafting legislation, rules, regulations and policies implementing the SST Agreement



Welcome to Streamlined Sales Tax Registration

Please select any one from the following:

- ☐ New Streamlined Sales Tax Registration
- ☐ New Traditional Registration
- ☐ Change/Update Streamlined Sales Tax Registration
- ☒ Change/Update Traditional Registration

Continue

Welcome to Traditional Registration Update

Identify Business

* Required Information

Please provide the following:

☐ FEIN OR ☐ SSN *

* Legal Name

What states do you want to notify of your update?

State	State ID
<input type="checkbox"/> Alabama	<input type="text"/>
<input type="checkbox"/> Arizona	<input type="text"/>
<input type="checkbox"/> Arkansas	<input type="text"/>
<input type="checkbox"/> Florida	<input type="text"/>
<input type="checkbox"/> Idaho	<input type="text"/>
<input type="checkbox"/> Illinois	<input type="text"/>
<input type="checkbox"/> Iowa *	<input type="text"/>
<input type="checkbox"/> Kansas	<input type="text"/>
<input type="checkbox"/> kentucky	<input type="text"/>
<input type="checkbox"/> Michigan	<input type="text"/>

State	State ID
<input type="checkbox"/> Minnesota	<input type="text"/>
<input type="checkbox"/> Missouri	<input type="text"/>
<input type="checkbox"/> North Carolina	<input type="text"/>
<input type="checkbox"/> South Dakota	<input type="text"/>
<input type="checkbox"/> Texas	<input type="text"/>
<input type="checkbox"/> Utah	<input type="text"/>
<input type="checkbox"/> Washington	<input type="text"/>
<input type="checkbox"/> Wisconsin	<input type="text"/>
<input type="checkbox"/> Wyoming	<input type="text"/>

Continue

Traditional Registration Update

Main Menu

What would you like to update?

- ☐ Business address and contact information
- ☐ Owner/Officer Information
- ☐ Add/End a location for an existing account
- ☐ Out of Business

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Continue

Traditional Registration Update

Business Tax Information

* Required Information

Legal Name *Paul Repair*

Business Name (if different than legal)

Primary Address ☐ Check if foreign address

Address

Apt or Suite

City

State

Select State

Zip

Phone

Fax

Email

Mailing Address (If different from primary address) ☐ Check if foreign address

Address

Apt or Suite

City

State

Select State

Zip

Enter NAICS Code that best describes your primary source of business

NAICS Code *123456* [Look up your NAICS code](#) on U.S. Census Bureau's website

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Traditional Registration Update

Contact Person Information

* Required Information

This is the person we will contact with questions regarding your registration, filings, and payments

Contact Name

Contact Address Information

☐ Check if foreign address

Address

Apt or Suite

City

State



Zip

Phone

Fax

Email

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Continue

Traditional Registration Update

Sales and Use Tax Information

* Required Information

What is your estimated monthly taxable sales and/or purchases?	
Alabama	<input type="text"/>
Arizona	<input type="text"/>
Arkansas	<input type="text"/>
Florida	<input type="text"/>

IS this business open all year long?

☐ Yes

☐ No

If Yes, Select the months you are active for sales and use tax:

☐ January ☐ February ☐ March ☐ April ☐ May ☐ June ☐ July ☐ August ☐ September ☐ October ☐ November ☐ December

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Traditional Registration Update

Business Tax Information

ALABAMA

* Required Information

Please provide the following information to complete your registration for sales tax for the state listed above:

Web Address

Enter NAICS Code that best describes your primary source of business

NAICS Code

[Look up your NAICS code](#) on U.S. Census Bureau's website

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Traditional Registration Update

Business Tax Information

FLORIDA

* Required Information

Is your primary business location rented?

☐ Yes

☐ No

* If yes, Do you operate from home?

☐ Yes

☐ No

Please enter the following information regarding your landlord.

* Name

Address

☐ Check if foreign address

Address

Apt or Suite

City

State

Select State



Zip

Phone

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Continue

Traditional Registration Update

Business Tax Information

IOWA

* Required Information

Please provide the following information for your business main location:

County Name

Select county



Sales Tax Permit Number

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Traditional Registration Update

Business Tax Information

KANSAS

* Required Information

Please provide the following information for your business main location:

County Name

Select county



Is your business located inside city limits?

☐

Yes

☐

No

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Continue

Traditional Registration Update

Business Tax Information

KENTUCKY

*** Required Information**

Previous Taxpayer ID:

Back

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Traditional Registration

Business Tax Information

MINNESOTA

* Required Information

* Is your business located on an Indian reservation?

☐ Yes ☐ No

If yes, name of Indian Reservation?

* Indian Reservation 

Please indicate which jurisdictions you need to report sales and use tax:

- ☐ Cook county sales and use
- ☐ Hermantown sales and use
- ☐ Mankato sales and use
- ☐ Minneapolis sales and use
 - ☐ Downtown liquor
 - ☐ Lodging
 - ☐ Downtown restaurant
 - ☐ Entertainment
- ☐ New Ulm sales and use
- ☐ Proctor sales and use
- ☐ Rochester sales and use
 - ☐ Rochester lodging
- ☐ St. Cloud food and liquor
- ☐ St. Cloud area tax
- ☐ St. Paul sales and use
- ☐ St. Paul lodging > 50 rooms
- ☐ St. Paul lodging < 50 rooms
- ☐ Two Harbors sales and use

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Traditional Registration Update

Business Tax Information

MISSOURI

* Required Information

Are you located inside city limits?

☐ Yes ☐ No

Do you sell the following? Check all that apply:

- ☐ Any type of alcoholic beverages
- ☐ Post-secondary educational textbooks
- ☐ Domestic utilities
- ☐ Aviation jet fuel
- ☐ Cigarettes or tobacco product

Do you sell food items that exempt from state sales tax?

☐ Yes ☐ No

Do you lease motor vehicles to Missouri customers that were purchased exempt?

☐ Yes ☐ No

Are you liable for consumers use tax?

☐ Yes ☐ No

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Traditional Registration Update

Business Tax Information

NORTH DAKOTA

* Required Information

North Dakota law requires foreign corporations, Limited Liability Companies, Limited Partnerships, and Limited Liability Partnerships to register and obtain a Certificate of Authority from the Secretary of State before our office can issue a sales tax permit.

Provide the ID number issued by the Secretary of State found on the Certificate of Authority.

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Traditional Registration Update

Business Tax Information

SOUTH CAROLINA

*** Required Information**

Consolidated return, do you file for multiple entities?

☐ Yes ☐ No

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Traditional Registration Update

Business Tax Information

SOUTH DAKOTA

*** Required Information**

What county is your business located in?

Select County 

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Traditional Registration Update

Business Tax Information

TEXAS

* Required Information

State specific ID

List any other distribution points, warehouses, of offices in Texas, that were not set up as business locations.

Free Text

Will you include installment payments that were received during a reporting period in total sales on your sales tax return for that period (that is, you keep your records on a cash basis of accounting?

☐ Yes

☐ No

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Traditional Registration Update

Business Tax Information

UTAH

* Required Information

Do you want to voluntarily file your sales tax on a monthly basis?

☐ Yes

☐ No

County Name

Select County ▼

Please describe, in detail, the purpose or nature of your business.

Free Text

Local government issuing business license (only applicable if located in the state).

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Traditional Registration Update

Business Tax Information

Washington

*** Required Information**

Please describe, in detail, the purpose or nature of your business.

Free Text

Taxpayer ID

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Traditional Registration Update

Update Owner, Officer, or Personal representative information

Indicate what action you need to take?

- ☐ Add new officer
- ☐ Update information on an existing officer
- ☐ End existing relationship

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Continue

Traditional Registration Update

Add Owner, Officer, or Personal Representative Information

* Required Information

Please enter your owner, officer, or personal representative information

Name	<input type="text"/>
SSN	<input type="text"/>
Title	<input type="text" value="Select Title"/> ▼

Officer Address Information

☐ Check if foreign address

* Address	<input type="text"/>	
Apt or Suite	<input type="text"/>	
* City	<input type="text"/>	
* State	<input type="text" value="Select State"/> ▼	* Zip <input type="text"/>
Phone	<input type="text"/>	
Fax	<input type="text"/>	
* Email	<input type="text"/>	

☐ Additional Officers

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Continue

Traditional Registration Update

Add Owner, Officer, or Personal Representative Information

SOUTH CAROLINA

* Required Information

Please select from the list the owner and provide additional information about the owner as required by the state

Name	SSN	E-mail
John Doe	XXX-XX-XXXX	Add More Information
Jane Doe	XXX-XX-XXXX	Add More Information

Name SSN

Percent of Ownership

Is this officer a South
Carolina resident? ☐ Yes ☐ No

* Number of Years, Months

Does your business have owners that are another business entity?

☐ Yes ☐ No

* If Yes, Provide Federal Identification Number (FEIN) for the business owner

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Traditional Registration

Add Owner, Officer, or Personal Representative Information TEXAS

* Required Information

Please select from the list the owner and provide additional information about the owner as required by the state

Name	SSN	E-mail
John Doe	XXX-XX-XXXX	Add More Information
Jane Doe	XXX-XX-XXXX	Add More Information

Name SSN

* Officers Driver License Number

Provide FEIN if this officer is involved in another company

Back

Continue

Traditional Registration Update

Update Owner, Officer, or Personal Representative Information

* Required Information

Please enter your owner, officer, or personal representative information

* Name

* SSN

Title ▼

Officer Address Information

☐ Check if foreign address

Address

Apt or Suite

City

State ▼

Zip

Phone

Fax

Email

☐ Additional Officers

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Continue

Traditional Registration Update

Update Owner, Officer, or Personal Representative Information

Additional Information for SOUTH CAROLINA

* Required Information

Please select from the list the owner and provide additional information about the owner as required by the state

Name	SSN	E-mail
John Doe	XXX-XX-XXXX	Add More Information
Jane Doe	XXX-XX-XXXX	Add More Information

Name SSN

* Percent of Ownership

* Is this officer a South Carolina resident? ☐ Yes ☐ No

* Number of Years, Months

Does your business have owners that are another business entity?

☐ Yes ☐ No

* If Yes, Provide Federal Identification Number (FEIN) for the business owner

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Traditional Registration Update

Update Owner, Officer, or Personal Representative Information

Additional Information for TEXAS

* Required Information

Please select from the list the owner and provide additional information about the owner as required by the state

Name	SSN	E-mail
John Doe	XXX-XX-XXXX	Add More Information
Jane Doe	XXX-XX-XXXX	Add More Information

Name

John Doe

SSN

XXX-XX-XXXX

* Officers Driver License Number

Provide FEIN if this officer is involved in another company

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Continue

Traditional Registration Update

End Existing Relationship

for Owner, Officer, or Personal Representative

* Required Information

* Name

* SSN

* Effective Date

☐ Additional Officers to end relationship

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Traditional Registration Update

Add/End Locations for an Existing Account

Indicate what action you need to take?

☐ Add Location

☐ End Location

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Traditional Registration Update

Sales Tax Location Information

* Required Information

Select States where you have more than one physical location

- | | | | | |
|-----------------------------------|-----------------------------------|------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Idaho | <input type="checkbox"/> kentucky | <input type="checkbox"/> North Dakota | <input type="checkbox"/> Utah |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> Illinois | <input type="checkbox"/> Michigan | <input type="checkbox"/> South Carolina | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Iowa | <input type="checkbox"/> Minnesota | <input type="checkbox"/> South Dakota | <input type="checkbox"/> Wisconsin |
| <input type="checkbox"/> Florida | <input type="checkbox"/> Kansas | <input type="checkbox"/> Missouri | <input type="checkbox"/> Texas | <input type="checkbox"/> Wyoming |

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Traditional Registration Update

Sales Tax Location Information

ALABAMA

* Required Information

* Provide all business locations (required if different from primary address)

Location Name

Location Begin Date

Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

ARIZONA

* Required Information

* Provide all business locations (required if different from primary address)

Location Name

* Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

ARKANSAS

* Required Information

* Provide all business locations (required if different from primary address)

Location Name

Location Begin Date

County Name (Required if
in Arkansas)

Select county



* Location Address

Address

Apt or Suite

City

State

Select State



Zip

Phone

* Describe your primary activity of business or product sold at this location:

Please type text here

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

FLORIDA

* Required Information

* Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State



Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

IDAHO

* Required Information

Provide all business locations (required if different from primary address)

Location Name

* Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

ILLINOIS

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State



Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

IOWA

* Required Information

Provide all business locations (required if different from primary address)

* Location Name

County Name (Required if
in Iowa)

Select county

Location Address

Address

Apt or Suite

City

State

Select State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

KANSAS

* Required Information

Provide all business locations (required if different from primary address)

Location Name

County Name (Required if
in Kansas)

Select county



Location Address

Address

Apt or Suite

City

State

Select State



Zip

Phone

Is your business located inside city limits?

☐

Yes

☐

No

Describe your primary activity of business or product sold at this location:

Please type text here

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

KENTUCKY

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

MICHIGAN

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Begin Date

Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

MINNESOTA

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State

Zip

Phone

Is your business located on an Indian reservation?

☐ Yes

☐ No

If yes, name of Indian Reservation?

Indian Reservation

Select reservation



Enter NAICS Code that best describes your primary source of business

NAICS Code

123456

[Look up your NAICS code](#) on U.S. Census Bureau's website

More Sales Tax Location question Next Page

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Traditional Registration Update

Sales Tax Location Information

MINNESOTA

* Required Information

Please indicate which jurisdictions you need to report sales and use tax:

- ☐ Cook county sales and use
- ☐ Hermantown sales and use
- ☐ Mankato sales and use
- ☐ Minneapolis sales and use
 - ☐ Downtown liquor
 - ☐ Lodging
 - ☐ Downtown restaurant
 - ☐ Entertainment
- ☐ New Ulm sales and use
- ☐ Proctor sales and use
- ☐ Rochester sales and use
 - ☐ Rochester lodging
- ☐ St. Cloud food and liquor
- ☐ St. Cloud area tax
- ☐ St. Paul sales and use
- ☐ St. Paul lodging > 50 rooms
- ☐ St. Paul lodging < 50 rooms
- ☐ Two Harbors sales and use

☐ Additional Locations to Register

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Traditional Registration Update

Sales Tax Location Information

MISSOURI

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State

Select State



Zip

Phone

More Sales Tax Location question Next Page

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Traditional Registration Update

Sales Tax Location Information

MISSOURI

*** Required Information**

Are you located inside city limits?

☐ Yes ☐ No

Do you sell the following? Check all that apply:

- ☐ Any type of alcoholic beverages
- ☐ Post-secondary educational textbooks
- ☐ Domestic utilities
- ☐ Aviation jet fuel
- ☐ Cigarettes or tobacco product

Do you sell food items that exempt from state sales tax?

☐ Yes ☐ No

Do you lease motor vehicles to Missouri customers that were purchased exempt?

☐ Yes ☐ No

Are you liable for consumers use tax?

☐ Yes ☐ No

☐ **Additional Locations to Register**

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Traditional Registration Update

Sales Tax Location Information

NORTH CAROLINA

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

NORTH DAKOTA

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

SOUTH CAROLINA

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

SOUTH DAKOTA

* Required Information

Provide all business locations (required if different from primary address)

Location Name County Name (Required if in South Dakota)

Location Address

Address
Apt or Suite
City
State Zip
Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

TEXAS

* Required Information

* Provide all business locations (required if different from primary address)

* Location Name * Location Begin Date

* Location Address

* Address
Apt or Suite
* City
* State * Zip
* Phone

* NAIC code of this location

* If location does not operate all year, is this a one-time sale, or will businesses be conducted at this location each year

☐ Yes ☐ No

* Will you deliver in your own vehicles, provide taxable services, and or have sales/service representatives going from this location to customers located in another city, county, or local taxing jurisdiction?

☐ Yes ☐ No

* Will you ship from this location to customers via common carrier?

☐ Yes ☐ No

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

UTAH

* Required Information

Provide all business locations (required if different from primary address)

Location Name

County Name (Required if
in Utah)

Select county

* Location Address

Address

Apt or Suite

City

State

Select State

Zip

Phone

* Local government issuing business license

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

WASHINGTON

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

Sales Tax Location Information

WISCONSIN

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

Back

Continue

Traditional Registration Update

Sales Tax Location Information

WYOMING

* Required Information

Provide all business locations (required if different from primary address)

Location Name

Location Address

Address

Apt or Suite

City

State

Zip

Phone

☐ Additional Locations to Register

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Continue

Traditional Registration Update

End Location for an Existing account

* Required Information

* Location Name

Location Code

* Location Address

* Address

Apt or Suite

* City

* State

* Zip

* Effective Date

☐ Additional Location to End

Back

Continue

Traditional Registration Update

Out of Business

This information will be sent to all states

* Effective business end date

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Continue

Traditional Registration

Thank You

Please click main menu if you need to make additional updates to your account. Otherwise, click continue to end the registration process

Main Menu

Continue